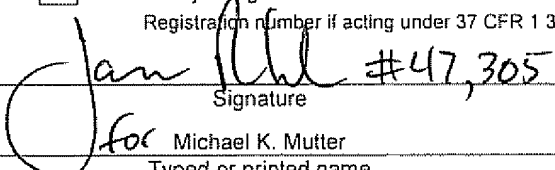


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) )		Docket Number (Optional) 5486-0204PUS1	
Application Number 10/692,014-Conf. #8518		Filed October 24, 2003	
For PRE-LOGIN DATA ACCESS			
Art Unit 2131		Examiner L. Chai	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 \$ 120 00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080 \$
<input type="checkbox"/>	Applicant claims small entity status See 37 CFR 1.27		
<input type="checkbox"/>	A check in the amount of the fee is enclosed		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached		
<input checked="" type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 I have enclosed a duplicate copy of this sheet		
I am the <input type="checkbox"/> applicant/inventor			
<input type="checkbox"/> assignee of record of the entire interest See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record Registration Number 29,680			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34 Registration number if acting under 37 CFR 1.34			
		August 27, 2007	
Signature		Date	
for Michael K. Mutter		(703) 205-8000	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below			
<input type="checkbox"/>	Total of 1 forms are submitted		